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FAX No. 3176377561

P. 001

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09/13/2005

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INDIANAPOLIS, IN 46204-5137

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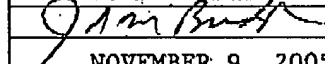
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JOHN M. BRADSHAW

(Depositor's name)



(Signature)

NOVEMBER 9, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/703,755	11/01/2000	Jay W. Grate	BATDA-50885-96	2097

TITLE OF INVENTION: PHOTOPATTERNABLE SORBENT AND FUNCTIONALIZED FILMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	12/13/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LEE, SIN J	1752	430-270100			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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BATTELLE MEMORIAL INSTITUTE

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature



Date

NOVEMBER 9, 2005

Typed or printed name

JOHN M. BRADSHAW

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46,573

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